

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/599796

FILING DATE

22 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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5		H		/		
6		H		/		
7		H		/		
8		⓪		/		
9		⓪		/		
10		⓪		/		
11		⓪		/		
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TOTAL IND.	7	↓	6	↓		↓
TOTAL DEP.	42	←	20	←		←
TOTAL CLAIMS	49		26			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						